

STATE OF IOWA

CHESTER J. CULVER, GOVERNOR PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

INFORMATIONAL LETTER NO. 675

February 7, 2008

TO: All Iowa Medicaid Dental Providers

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise

RE: Sealants, Root Canal Retreatments and Implants

EFFECTIVE: February 1, 2008

This is to advise of policy changes pursuant to changes in the Administrative Rules and to clarify sealant coverage.

Sealant coverage is expanded to allow for placement of sealants on deciduous molars and bicuspid teeth. With this change, teeth numbers covered for sealants are A, B, I - L, T, S, 2 - 5, 12 - 15, 18 - 21 and 28 - 31.

NOTE: Sealants remain covered for children through 18 years of age. Sealants are covered for persons 19 years of age and over who have a physical or mental disability that impairs their ability to maintain adequate oral hygiene. A statement of the disability should be noted in the Remarks section, Box 35 on the dental claim form.

Replacement sealants are allowed when medically necessary. Documentation in the patient record must show that the sealant is partially or completely missing.

Root canal retreatments are allowed with prior authorization. Approval is granted when the conventional treatment has been completed, a reasonable time has elapsed and failure has been demonstrated. A radiograph and narrative history must be submitted with the request for prior authorization. Procedure code D3346, anterior tooth may be authorized for children and adults. D3347, bicuspid and D3348, molar may be authorized only for children under 21 years of age.

Dental implants are covered for both adults and children when prior approval has been received. Authorization is granted when the person is missing significant oral structures due to cancer, traumatic injuries, or developmental defects such as cleft palate, and cannot use a conventional denture.

If you have any questions, please contact IME Provider Services, 1-800-338-7909, locally 515-725-1004 or by e-mail at imeproviderservices@dhs.state.ia.us